Round 1

Behavioral Surveillance Survey
Zambia

Long Distance Truck Drivers

EXECUTED BY:
Tropical Diseases
Research Centre

ADMINISTERED BY:
National AIDS Council
Ministry of Health
Zambia

WITH TECHNICAL ASSISTANCE FROM:
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EXECUTIVE SUMMARY

Background

Zambia is one of the countries hardest hit by the HIV epidemic. HIV rates are particularly high along major highways and border posts. In 2000, a project was initiated with truck drivers and female sex workers at five of the major border posts and truck stops, namely Livingstone, Chirundu, Chipata, Kapiri-Mposhi and Kasumbalesa. The project is implemented by World Vision International in collaboration with other institutions and aims at behaviour change through peer education, social marketing of condoms and improved sexually transmitted infections (STI) care.

As part of the project, behavioural surveillance is done by the yearly repetition of a behavioural survey in both female sex workers and truck drivers in three of the five sites, using the methodology of the 'Behavioural Surveillance Surveys' (BSS) developed by Family Health International (FHI). The Tropical Disease Research Centre (TDRC) was contracted to implement the surveys with technical assistance from FHI's IMPACT project. The main objectives of the first round of the behavioural survey in truck drivers was (1) to provide baseline data for the measurement of the impact of the combined HIV prevention efforts, (2) to provide information to help the programme planning, and (3) to help establish a monitoring system that will track behavioural trend data for high risk and vulnerable target groups that influence the epidemic in Zambia.

Methodology

At the three selected sites, Livingstone and Chirundu at the Zambia-Zimbabwe border and Chipata at the Zambia-Malawi border, the main locale for the congregation of long distance truck drivers (LDDs) was identified. This was normally at the border itself. Between February and April 2000, all LDDs aged 18 and older passing through during the day were invited to participate until the desired sample size was obtained. Those LDDs who consented to take part were administered a standardised questionnaire that was based on the BSS prototype.

Results

In total 902 men were contacted at the three border sites (300 in Livingstone and 301 each in Chirundu and Chipata). A total of 867 (96%) had sufficient questionnaire data.

The mean age of participants was 37 years, the great majority (88%) had completed at least primary school (7^{th} class) and most (86%) were currently married. In Livingstone and Chipata more than half of the drivers (61% and 54% respectively) were Zambians, but this was not the case in Chirundu where most were Zimbabweans (58%). Other common nationalities among the participants were South-Africans (8%) and Malawians (7%). About two thirds of the drivers (67%) reported being away from their home more than one month a year and that they cross the border on average 5 to 6 times in a three-month period.

The great majority of respondents (99%) were sexually active, the median age of sexual debut was 18 years and of those who were sexually active, almost all (97%) had sexual intercourse in the past 12 months. The median number of sexual partners in those 12 months was 2, with almost half (46%) reporting only one partner. Of those drivers who reported sexual intercourse in the past 12 months, almost all (99.7%) had intercourse with a 'regular' partner. Almost one third

(30%) reported intercourse with at least one 'commercial' partner and 22% with a 'non-regular' partner. The reported frequency of sexual intercourse was a median of 6 times per month with a regular partner and 3 times per month with a commercial partner and with a non-regular partner.

Reported condom use at the last sexual contact was 19% with a regular partner, 75% with a non-regular partner and 92% with a commercial partner. Almost three quarters (71%) reported they never used condoms with their regular partner, 59% said they always or almost always use a condom with a non-regular partner and 80% said they always use condoms with a commercial partner. As reason for not using a condom with a regular and with a non-regular partner they most frequently mentioned they didn't think it was necessary (55% and 43% respectively).

Almost two thirds of the men reported to have ever used a condom (63%) and almost all (97%) knew where they could be obtained. The places where condoms can be obtained most often mentioned were shops (76%), a clinic or hospital (64%), a bar, guesthouse or hotel (53%) and pharmacies (40%). Almost all men (98%) reported that they could obtain condoms in less than 1-hour time.

Most men (96%) had ever heard of 'diseases that can be transmitted through sexual intercourse' and 73% of these men could mention at least two symptoms of STD in men and 52% at least two STD symptoms in women.

About one tenth of the men (9%) reported to have had either a genital discharge (7%) or genital ulcers or scores (6%) in the past 12 months. Two thirds (69%) of these sought advice at a health facility. One quarter (25%) sought advice from a traditional healer, 18% from a pharmacist, 8% bought capsules on the street and 13% took medicines at home. Slightly more than one third (38%) said they told their partner, 44% stopped having sex and 22% used condoms while symptomatic.

Most men (81%) knew someone who had HIV/AIDS. They generally knew that HIV could be transmitted by infected needles (95%) or from mother to child during pregnancy (91%). That it also could be transmitted through breastfeeding was less known (69%). Still 17% of the men thought mosquito bites could transmit HIV and 6% believed sharing meals was sufficient to get infected. Most men (96%) were aware that a healthy looking person could be infected with HIV. The way to prevent HIV best known was abstinence (90%), followed by faithfulness (84%) and condom use (76%). Only 11% of those who knew that HIV could be transmitted from mother to child also knew that treating pregnant infected women could prevent this infection.

Most men (92%) reported to have access to an HIV voluntary counselling and testing facility. More than a quarter (30%) said to have ever been tested. Of these, about one third (35%) said it was not on a voluntary basis, and 9% did never found out the result.

Five behavioural indicators were defined as project indicators. Indicator 1 measures knowledge of STI symptoms (71% of the men could at least cite two major STI symptoms in men), indicator 2 measures knowledge of HIV prevention (89% could mention at least two HIV prevention strategies), indicator 3 measures condom availability (98% reported easy access to condoms), indicator 4 measures condom use with commercial partners (92% of the men reported that they used a condom in the last commercial sex act) and indicator 5 measures condom use with casual partners (75% reported that they used a condom in the last sex act with a non-regular partner).

Discussion and conclusions

The truck driver population surveyed was international, urban, middle aged, mostly married and similar to the general population in terms of educational level and religion. Most of them were a significant proportion of their time on the road.

About half of them had an at-risk risk sexual behaviour, with multiple sex partners. Knowledge and behaviour related to HIV and STD was generally good and condoms are reported to be available. Condom use was reported to be very high with commercial sex partners, moderately high with non-regular partners and low with regular partners. Knowledge and behaviour on STD symptoms was moderate and the availability and utilisation of counselling and testing facilities needs to be further explored.

The WVI project should focus on behaviour change, by peer and other education, and on further exploring and enhancing condom use both with commercial and casual partners. Knowledge and care seeking for STD symptoms could be improved by the behaviour change activities, by improving the access to and the quality at selected health facilities at the truck stops, by developing treatment facilities at the trucking companies and eventually by involving non-formal service providers such as private practitioners and pharmacists and by providing treatment facilities at the truck stops outside the health facilities. The possibility for offering HIV VCT facilities should be further explored.

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List of Abbreviations

BSS	Behavioral Surveillance Surveys
CMAZ	Church Medical Association of Zambia
DHS	Demographic and Health Survey
FHI	Family Health International
FSW	Female Sex Workers
HIV	Human Immunodeficiency Virus
IMPACT	Implementing AIDS Prevention and Care Project
ITM	Institute of Tropical Medicine
JICA	Japanese International Cooperation Agency
LDD	Long Distance Truck Driver
SBS	Sexual Behavior Survey
SFH	Society for Family Health
STD	Sexually Transmitted Diseases
STI	Sexually Transmitted Infections
TDRC	Tropical Disease Research Centre
USAID	U.S. Agency for International Development
VCT	Voluntary Counselling and Testing
WVI	World Vision International

1. INTRODUCTION

Zambia is one of the countries hardest hit by the HIV epidemic. The 1998 antenatal surveillance found HIV prevalence rates of 27 percent in Zambia's major cities[1]. A Ministry of Health expert group estimated that provincial adult HIV prevalence was 26 percent in Lusaka, 23 percent in the Copperbelt and 19 percent in the Northern Province. National adult HIV prevalence is estimated to be 20 percent, which means that more than one million Zambians are infected with HIV. HIV rates are twice as high in urban areas as in rural areas.

Rates are very high along major highways and borders, in trading centres, farming and mining towns. The 1998 surveillance reported rates of 31 percent in the border town of Livingstone and 27 percent in Chipata. In neighbouring Zimbabwe, very high rates are also observed in border towns. HIV rates among pregnant women are 60% in Beitbridge on the South African border and 45% in Victoria Falls on the Zambian border. Zambia's major highways run alongside the two major rail lines, from Livingstone to Kasumbalesa and from Kapiri Mposhi to Nakonde. Its major trucking borders are Chirundu, Livingstone, Chipata, Nakonde and Kasumbalesa and its major internal trucking town is Kapiri Mposhi, at the junction of the two railway routes. These six sites have an estimated population of 250,000 inhabitants, including 1,500 sex workers and an itinerant population of 2,000 truckers.

Sexually transmitted diseases (STDs) are not well documented in Zambia. The number of reported STD cases rose from 190,344 in 1981 to 307,957 in 1992, the last year for which data are available. In community surveys, up to 10 percent of men report having had an STD in the past year. In a survey of 66,000 pregnant women screened in 1997 in five districts—Chipata, Kitwe, Livingstone, Lusaka and Ndola—10 to 15 percent, with a mean of 12 percent, had syphilis. In a recent community- based survey in Ndola, prevalence rates for gonorrhoea and genital chlamydial infection were approximately 2% in the general population and as high as 15% for gonorrhoea and 9% for genital chlamydial infection in female sex workers. Prevalence rates for trichomoniasis and syphilis were 29% and 14% respectively in the general population and 42% for both in sex workers[2]. This confirms that sexually transmitted diseases remain a major public health problem in Zambia.

Data from the Demographic and Health Surveys (DHS) and other Knowledge, Attitudes and Practices surveys show that, although sexual behaviour seems to have changed in the early 1990s, it has stagnated over recent years[3]. In a nation-wide sexual behaviour survey performed in 1998, 97% of men and 92% of women had heard of condoms and 90% and 76% respectively knew where to obtain them, but only 42% and 21% respectively had ever used condoms. Only 29% of men and 19% of women who had a non-regular partner in the last year had used a condom during their last intercourse[4]. In a survey conducted with female sex workers in Ndola in 1997-1998, only 28% reported using condoms in their most recent contact with a client[2].

[1] US Bureau of the Census, HIV/AIDS Surveillance Data Base, June 2000 release

[2] Morison L, Weiss HA, Buvé A, et al. Commercial Sex and the Spread of HIV in four Cities in Sub-Saharan Africa. AIDS. In press.

[3] Bloom SS, Banda C, Songolo G, et al. Looking for Change in Response to the AIDS Epidemic: Trends in AIDS Knowledge and Sexual Behavior in Zambia, 1990 through 1998. JAIDS 2000;25:77-85.

[4] Zambia Sexual Behaviour Survey 1998. Central Statistical Office, Republic of Zambia and Measure Evaluation. April 1999.

For these reasons, a project was initiated with high-risk populations at five of the major border posts and truck stops, namely Livingstone, Chirundu, Chipata, Kapiri-Mposhi and Kasumbalesa. The target populations are truck drivers passing through and female sex workers (FSW) operating around the stops. The project aims to change behaviour through peer education and social marketing of condoms, and to improve STD care. The project is implemented by World Vision International (WVI) in collaboration with the Government of Zambia, Society for Family Health (SFH), Tacintha and the Church Medical Association of Zambia (CMAZ), receives technical support from Family Health International's (FHI) IMPACT project, and is funded by the U.S. Agency for International Development (USAID) and the Japanese International Cooperation Agency (JICA).

The project's impact is evaluated by repeatedly measuring some behavioural and biological outcomes. A behavioural survey is conducted yearly with both female sex workers and truck drivers in three of the five sites, using the 'Behavioural Surveillance Surveys' (BSS) methodology developed by FHI. Biological impact is measured by a baseline and end-of-project survey of the prevalence rate of the major STDs among female sex workers.

In addition, the BSS is justified in its own right by the need to obtain data on behavioral trends among target populations. The data will allow the NACP and other actors to follow the evolution of the epidemic and to plan their prevention activities accordingly. Monitoring the HIV epidemic and assessing the impact of HIV prevention interventions is a complex and multi-faceted process. HIV sentinel surveillance, the traditional cornerstone of a country's HIV monitoring efforts, becomes less useful as an epidemic matures. This is because HIV prevalence changes very slowly in response to behavioral changes in populations due to the chronic nature of HIV infection. Thus, HIV surveillance data cannot indicate whether prevention interventions are having their desired short-term effect of changing behaviors. Repeated behavioral surveys, on the other hand, can capture trends in behavioral change that lead to reduced HIV infection, such as fewer sexual partners and increased condom use among non-regular partners.

The Tropical Disease Research Centre (TDRC) implemented the surveys with technical assistance from FHI's IMPACT project and laboratory back up from the Institute of Tropical Medicine (ITM) in Antwerp, Belgium.

This report presents the results of the first round of behavioural surveillance in long distance truck drivers (LDDs).

2. OBJECTIVES

1. To help establish a monitoring system that will track behavioural trend data for high-risk and vulnerable target groups that influence the epidemic in Zambia.

2. To provide information on behavioural trends of key target groups in some of the same catchment areas where HIV voluntary counselling and testing is being offered.

3. To provide information to help guide program planning.

4. To provide evidence of the relative success of the combination of HIV prevention efforts taking place in selected sites.

5. To obtain data in a standardised format, which will enable comparison with other behavioural surveillance studies carried out in other countries.

3. METHODOLOGY

3.1. Sample sizes, sampling and survey procedures

3.1.1. Sample size.

The sample size was calculated to detect a 15% reduction in indicators with an initial prevalence of 50%. The design effect was estimated at 2 because of the cluster design used to sample the target groups. The level of precision was set at 0.05 and the power at 0.80.

Using the data above, the required sample size was 267. However, allowing for the fact that not all long distance drivers (LDDs) will have "non-regular" partners, and recognizing that several of the indicators concern only the subsample that have had non-regular partners in the past 12 months, the sample size was increased to 722. This was based on the estimate that 37% of the drivers have non-regular partners. There was also a chance that many of the target group members randomly chosen would not end up being interviewed because of the sampling approach. Therefore the sample size was increased to 900 under the assumption that non-response would be approximately 25%. (Non-response includes refusal, failure to complete an interview because of a "no-show", and incomplete interviews).

The sample was divided proportionally to the populations over the three southern sites of the five project sites, Livingstone, Chirundu and Chipata with 300 LDDs to be sampled in each. The two northern sites were excluded because of convenience and to avoid repetition in sampling truck drivers who cross the country from North to South and may pass a northern and a southern site.

3.1.2. Sampling and Survey Procedure

The main locale where LDDs congregate was identified in each city (Chirundu, Livingstone and Chipata). This was normally at the border itself when truck drivers drove through or reported at the customs office. Interviewers worked in these areas each day to interview LDDs as they passed through the site.

All LDDs aged 18 and older passing through a particular site during the survey period were invited to participate. The interviewer brought those LDDs who agreed to participate to the selected interview location and administered a questionnaire. In order to avoid interviewing the same driver multiple times, a ticket or receipt was given to each participant when they were interviewed.

The interviewer used a standardised questionnaire that was based on the BSS prototype. It included questions on socio-demographic characteristics, sexual behaviour and sex work characteristics, and knowledge, perceptions and practices on condoms, STDs, HIV and HIV VCT. A copy of the questionnaire is found in attachment [1].

The protocol, consent forms and draft questionnaires were submitted for approval to both the Zambian Ministry of Health Ethical Review Committee and the Protection of Human Subjects Committee of Family Health International.

3.2. Data Processing and Analysis

The field supervisors checked all questionnaires for completeness. They were then transported and stored at the TDRC office. Data entry was done at the TDRC office using Epi-Info software, with data entered twice to ensure accuracy. Data analysis was performed using Epi-Info and SPSS.

Data were analysed in a descriptive way only, by site. Descriptive measures, such as simple proportions, means and medians were calculated to determine the prevalence of relevant variables by site and for the total sample. Confidence intervals were calculated where relevant using a design effect of 2.

4. RESULTS

In total, 902 men were contacted at the three border sites between February 25 and April 15, 2000 (300 in Livingstone and 301 in Chirundu and Chipata each). Thirty men (3.3%) refused to participate and another five men (0.6%) were excluded from the analysis because their questionnaires were incomplete. Therefore, 867 men remained who were included in the analysis (278 from Livingstone, 291 from Chirundu and 298 from Chipata). For nine of these men, only socio-demographic data were available.

4.1. Socio-demographic characteristics of the study population

Table 1 presents the socio-demographic characteristics of the study population by site.

4.1.1. Age

The mean age of the men was 37 years with the 35 to 40-year-old age group accounting for almost a quarter of the men. The age distribution was similar in the three sites, although drivers in Chipata were slightly younger.

4.1.2. Education

The median number of total years of education was 10. Very few men reported having no education at all, and the majority (88.4%) had completed at least primary school (which corresponds with 7th class). Seventy percent completed junior secondary school (9th class) and 30% percent completed senior secondary school (12th class). Sixty-one men (7%) said they had superior education. The men in Livingstone were slightly more educated than in Chirundu.

4.1.3. Religion

Most men (96.9%) said they belonged to a church, the great majority being Christians. In Chipata only, there were some men who were Muslim (9.1%) or who belonged to another church (4.7%).

Table 1.1: Socio-demographic characteristics of the study population by border site

Characteristic	Livingstone		Chirundu		Chipata		Total	
Age (years)								
Mean	38.7		37.1		35.3		**37.0**	
15-19	1	0.4	2	0.7	4	1.3	**7**	**0.8**
20-24	11	4.0	23	7.9	42	14.1	**76**	**8.8**
25-29	32	11.6	45	15.5	54	18.1	**131**	**15.1**
30-34	49	17.7	51	17.5	52	17.4	**152**	**17.6**
35-39	63	22.7	55	18.9	69	23.2	**187**	**21.6**
40-45	63	22.7	62	21.3	27	9.1	**152**	**17.6**
45-49	36	13.0	38	13.1	28	9.4	**102**	**11.8**
50+	22	7.9	15	5.2	22	7.4	**59**	**6.8**
Total	277		291		298		**866**	
Total years of education								
Mean	10.3		10.0		9.7		**10.1**	
Level of education	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
None	17	6.1	5	1.7	19	6.4	**41**	**4.7**
Prim. school not completed	19	6.8	17	5.8	24	8.1	**60**	**6.9**
Prim. school completed	44	15.8	49	16.8	64	21.5	**157**	**18.1**
Junior sec. school completed	91	32.7	150	51.5	108	36.2	**349**	**40.3**
Senior sec. school completed	107	38.5	70	24.1	83	27.9	**260**	**30.0**
Total	278		291		298		**867**	
Religion	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
No religion	13	4.7	11	3.8	3	1.0	**27**	**3.1**
Christian	256	92.1	264	90.7	254	85.2	**774**	**89.3**
Muslim	5	1.8	3	1.0	27	9.1	**35**	**4.0**
Buddhist	0	0.0	1	0.3	0	0.0	**1**	**0.1**
Traditionalist	1	0.4	6	2.1	2	0.7	**9**	**1.0**
Other	3	1.1	6	2.1	12	4.0	**21**	**2.4**
Total	278		291		298		**867**	

4.1.4. Marital situation

Most men (89.6%) had been married and most (86.3%) were also currently married. The great majority (90.3%) was living with someone (spouse or other partner) and only 9.7% were living alone. The median age at marriage was 25 years.

Table 1.2: Socio-demographic characteristics of the study population by border site (continued)

Characteristic	Livingstone		Chirundu		Chipata		Total	
Ever married	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	255	91.7	268	92.1	254	85.2	**777**	**89.6**
Total	278		291		298		**867**	
Marital situation	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Married, living with spouse	207	74.5	228	78.4	223	74.8	**658**	**75.9**
Married, living with other	26	9.4	30	10.3	24	8.1	**80**	**9.2**
Married, living alone	8	2.9	2	0.7	0	0.0	**10**	**1.2**
Not married, living with someone	20	7.2	9	3.1	16	5.4	**45**	**5.2**
Not married, living alone	17	6.1	22	7.6	35	11.7	**74**	**8.5**
Total	278		291		298		**867**	
Age at marriage[1]								
Mean	25.1		24.6		23.8		**24.5**	
Total	247		262		246		**755**	

[1] Only those ever married are included

4.1.5. Country of origin

The truck drivers' country of origin differed from one site to another. In Livingstone and Chipata, more than half of the drivers (61.2% and 53.7% respectively) were Zambians, while in Chirundu most were Zimbabweans (58.1%). Of the total sample, 47.3% were Zambians, 31.6% Zimbabweans, 8.3% were South Africans and 6.5% were Malawians. Most men reported that their home was located in a city (78.9%).

4.1.6. Travelling characteristics

About two-thirds of the drivers (67.1%) are away from home for more than one month a year. They cross the border on average five to six times in a three-month period (median 4). The drivers crossing at Livingstone and Chirundu travelled more than the drivers crossing in Chipata.

Table 1.3: Socio-demographic characteristics of the study population by border site (continued)

Characteristic	Livingstone		Chirundu		Chipata		Total	
Country of origin	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Zambia	170	61.2	80	27.5	160	53.7	**410**	**47.3**
Zimbabwe	51	18.3	169	58.1	54	18.1	**274**	**31.6**
South Africa	29	10.4	26	8.9	17	5.7	**72**	**8.3**
Malawi	3	1.1	9	3.1	44	14.8	**56**	**6.5**
Botswana	21	7.6	0	0.0	1	0.3	**22**	**2.5**
Others	4	1.4	7	2.4	22	7.4	**33**	**3.8**
Total	278		291		298		**867**	
Urban/rural	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Urban	238	85.6	234	80.4	212	71.1	**684**	**78.9**
Rural	40	14.4	57	19.6	86	28.9	**183**	**21.1**
Total	278		291		298		**867**	
Proportion of time travelling	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
> one month in the past year	208	75.1	197	67.9	175	58.7	**580**	**67.1**
< one month in the past year	69	24.9	93	32.1	123	41.3	**285**	**32.9**
Total	277		290		298		**865**	
Number of border crossings in the past 3 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Median	6		5		2		**4**	
0	1	0.4	0	0.0	18	6.2	**19**	**2.2**
1-2	42	15.2	78	27.8	151	51.9	**271**	**32.0**
3-5	74	26.8	66	23.5	60	20.6	**200**	**23.6**
6-9	93	33.7	61	21.7	39	13.4	**193**	**22.8**
9+	66	23.9	76	27.0	23	7.9	**165**	**19.5**
Total	276		281		291		**848**	

4.2. Behavioural characteristics of the study population

Table 2 presents the behavioural characteristics of the study population by site.

4.2.1. Alcohol and drug use

About half of the men (48.2%) reported that they used alcohol at least once a week and 10% said they drank on a daily basis. About one-tenth (11.8%) said they had used drugs. Most of these

(91.1%) reported using daga (marijuana). Eleven men reported using a hard drug (heroin, cocaine or mandrax).

Table 2.1: Alcohol and drug use by the study population

Characteristic	Livingstone		Chirundu		Chipata		Total	
Alcohol use	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Every day	32	11.5	31	10.7	28	9.4	**91**	**10.5**
At least once a week	116	41.7	105	36.2	105	35.4	**326**	**37.7**
Less than once a week or never	130	46.8	154	53.1	164	55.2	**448**	**51.8**
Total	278		290		297		**865**	
Drug use	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Ever	37	13.3	39	13.4	25	8.7	**101**	**11.8**
Never	241	86.7	252	86.6	262	91.3	**755**	**88.2**
Total	278		291		287		**856**	
Drugs used[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Daga	33	89.2	35	89.7	24	96.0	**92**	**91.1**
Heroin	1	2.7	0	0.0	3	13.0	**4**	**4.0**
Cocaine	0	0.0	1	2.6	2	8.0	**3**	**3.0**
Mandrax	0	0.0	2	50.0	2	50.0	**4**	**4.0**
Other	3	8.1	2	5.1	1	4.0	**6**	**5.9**
Total	37		39		25		**101**	

[1] Only those who ever used drugs are included

4.2.2. Sexual behaviour

The great majority of respondents (99.1%) were sexually active. The mean and median age of sexual debut was 18 years. Of those who were sexually active, almost all (96.5%) had sexual intercourse in the past 12 months. The median number of sexual partners in those 12 months was two, with almost half (45.9%) reporting only one partner. The drivers in Chirundu had the highest number of partners (63% reporting more than one partner in the past year), followed by drivers in Livingstone (50%) and Chipata (39%).

Table 2.2: Sexual behaviour reported by the study population

Characteristic	Livingstone		Chirundu		Chipata		Total	
Sexually active	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Ever	277	100.0	288	99.0	293	98.3	**858**	**99.1**
Total	277		291		298		**866**	
Age at first sexual intercourse[1]								
Mean	17.9		18.3		17.8		**18.0**	
Total	260		270		230		**760**	
Sexual partners in the last 12 months[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Mean	2.0		3.5		2.6		**2.7**	
Median	2		2		1		**2**	
Range	0-13		0-91		0-83		**0-91**	
0	14	5.1	5	1.7	11	3.8	**30**	**3.5**
1	124	44.8	101	35.2	168	57.5	**393**	**45.9**
2	78	28.2	74	25.8	47	16.1	**199**	**23.2**
3-4	44	15.9	47	16.4	35	12.0	**126**	**14.7**
5+	17	6.1	60	20.9	31	10.6	**108**	**12.6**
Total	277		287		292		**856**	

[1] Only those who are sexually active are included

4.2.3. Number and type of sexual partners

Of those drivers who reported having sexual intercourse in the past 12 months, almost all (99.7%) had intercourse with a 'regular' partner (spouse or live-in sexual partner). Almost one-third (30.1%) reported intercourse with at least one 'commercial' partner (partner with whom sex was exchanged for money) and 22% with a 'non-regular' partner (sexual partner who is not a spouse or live-in, and was not paid).

Table 2.3: Sexual behaviour reported by the study population (continued)[1]

Characteristic	Livingstone		Chirundu		Chipata		Total	
Number of regular sexual partners in the last 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Mean	1.3		1.2		1.2		**1.2**	
Median	1		1		1		**1**	
Range	0-4		1-4		1-4		**0-4**	
0	2	0.8	0	0.0	0	0.0	**2**	**0.3**
1	191	74.9	220	82.4	211	78.7	**622**	**78.7**
2+	62	24.3	47	17.6	57	21.3	**166**	**21.0**
Total	255		267		268		**790**	
Number of commercial sexual partners in the last 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Mean	0.5		1.9		1.3		**1.2**	
Median	0		0		0		**0**	
Range	0-12		0-70		0-82		**0-82**	
0	210	79.2	159	56.8	207	74.2	**576**	**69.9**
1	25	9.4	31	11.1	22	7.9	**78**	**9.5**
2	12	4.5	31	11.1	12	4.3	**55**	**6.7**
3-4	12	4.5	34	12.1	22	7.9	**68**	**8.3**
5+	6	2.3	25	8.9	16	5.7	**47**	**5.7**
Total	265		280		279		**824**	
Number of non-regular sexual partners in the last 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Mean	0.3		0.6		0.2		**0.4**	
Median	0		0		0		**0**	
Range	0-9		0-20		0-10		**0-20**	
0	204	76.7	194	69.0	248	88.3	**646**	**78.0**
1	48	18.0	59	21.0	22	7.9	**129**	**15.6**
2+	14	5.3	28	10.0	11	3.9	**53**	**6.4**
Total	266	32.1	281		281		**828**	

[1] Those who did not have sexual intercourse in the last 12 months are excluded

4.2.4. Frequency of sexual intercourse

The drivers who reported at least one sexual partner in the past 12 months were asked about the frequency of sexual intercourse in the last 30 days with the most recent partner of each type. The reported frequency was a median of six times per month with a regular partner and three times per month with a commercial partner and with a non-regular partner.

Table 2.4: Sexual behaviour with most recent partner by type of partner[1]

Characteristic	Livingstone	Chirundu	Chipata	Total
Frequency of sexual intercourse over the last 30 days with regular partner				
Mean	4.6	6.6	7.1	**6.1**
Median	3	4	5	**4**
Range	0-32	1-90	1-40	**0-90**
Total	206	237	177	**620**
Frequency of sexual intercourse over the last 30 days with commercial partner				
Mean	2.4	3.0	3.1	**3.0**
Median	2	2	2	**2**
Range	1-15	1-30	1-15	**1-30**
Total	47	113	64	**224**
Frequency of sexual intercourse over the last 30 days with non regular partner				
Mean	3.0	3.1	2.0	**2.8**
Median	2	2	2	**2**
Range	1-15	1-20	1-6	**1-20**
Total	42	75	28	**145**

[1] Only those who had sexual intercourse in the last 12 months with this type of partner are included

4.3. Condom use by the study population

Table 3 presents the level of condom use with each type of partner.

4.3.1. Condom use with regular partner

Only 18.5% of the men who reported having sexual intercourse with a regular partner in the past 12 months said they used a condom at the last sexual contact. The majority (91%) said this was on their own initiative (51.7%) or joint initiative (39.3%). When those men who did not use a condom were asked why, they most frequently responded that they didn't think it was necessary (55.2%). Almost nobody (0.3%) said it was because condoms were not available or too expensive, or because the partner objected (1.4%). Other reasons mentioned were that they didn't like condoms (11.9%) or that they were using another contraceptive method (12.8%). When asked about the regularity of condom use with their regular partner in the last year, almost three-quarters (71.0%) reported that they never used condoms.

Table 3.1: Condom use with most recent regular partner[1]

Characteristic	Livingstone		Chirundu		Chipata		Total	
Condom use at last sexual contact	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	35	14.1	57	21.3	53	19.8	**145**	**18.5**
No	214	85.9	211	78.7	215	80.2	**640**	**81.5**
Total	249		268		268		**785**	
Who suggested condom use[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Myself	13	37.1	34	59.6	28	52.8	**75**	**51.7**
My partner	5	14.3	1	1.8	7	13.2	**13**	**9.0**
Joint decision	17	48.6	22	38.6	18	34.0	**57**	**39.3**
Total	35		57		53		**145**	
Reason for no condom use[3]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Not available	0	0.0	2	0.9	0	0.0	**2**	**0.3**
Too expensive	0	0.0	0	0.0	0	0.0	**0**	**0.0**
Partner objected	3	1.4	4	1.9	2	0.9	**9**	**1.4**
Don't like them	31	14.5	19	9.0	26	12.1	**76**	**11.9**
Used other contraceptive	38	17.8	30	14.2	14	6.5	**82**	**12.8**
Didn't think it was necessary	91	42.5	120	56.9	142	66.0	**353**	**55.2**
Didn't think of it	16	7.5	12	5.7	4	1.9	**32**	**5.0**
Itching	1	0.5	1	0.5	1	0.5	**3**	**0.5**
Other	77	36.3	17	8.1	25	11.6	**119**	**18.7**
Total	214		211		215		**640**	
Condom use over the past 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Every time	19	7.6	24	9.0	22	8.2	**65**	**8.3**
Almost every time	9	3.6	1	0.4	6	2.2	**16**	**2.0**
Sometimes	34	13.6	72	26.9	41	15.3	**147**	**18.7**
Never	188	75.2	171	63.8	199	74.3	**558**	**71.0**
Total	250		268		268		**786**	

[1] Only those who had sexual intercourse in the last 12 months with a regular partner are included
[2] Only those who used a condom are included
[3] Only those who did not use a condom are included

4.3.2. Condom use with commercial partner

The great majority (91.5%) of the men who reported having sexual intercourse with a commercial partner in the past 12 months said they used a condom at the last sexual contact. Again, they claimed that this was mostly on their own initiative (76%) or a joint decision (17%). Of the 22 men who said that they did not use a condom, 8 men said that they didn't think of it, 7 that they didn't like it, 4 said that condoms were not available, and 3 that they thought it wasn't necessary.

Eighty percent of men said they always used a condom with a commercial partner and almost nobody (3.5%) said they only used it sometimes or never.

Table 3.2: Condom use with most recent commercial partner[1]

Characteristic	Livingstone		Chirundu		Chipata		Total	
Condom use at last sexual contact	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	52	92.9	116	93.5	68	87.2	**236**	**91.5**
Total	56		124		78		**258**	
Who suggested condom use[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Myself	40	76.9	81	69.8	58	85.3	**179**	**75.8**
My partner	4	7.7	8	6.9	5	7.4	**17**	**7.2**
Joint decision	8	15.4	27	23.3	5	7.4	**40**	**16.9**
Total	52		116		68		**236**	
Reason for no condom use[3]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Not available	0	0.0	0	0.0	4	40.0	**4**	**18.2**
Too expensive	0	0.0	0	0.0	1	10.0	**1**	**4.5**
Partner objected	0	0.0	0	0.0	1	10.0	**1**	**4.5**
Don't like them	2	50.0	3	37.5	2	20.0	**7**	**31.8**
Used other contraceptive	1	25.0	0	0.0	0	0.0	**1**	**4.5**
Didn't think it was necessary	1	25.0	1	12.5	1	10.0	**3**	**13.6**
Didn't think of it	0	0.0	4	50.0	4	40.0	**8**	**36.4**
Itching	0	0.0	0	0.0	0	0.0	**0**	**0.0**
Other	1	25.0	1	12.5	3	30.0	**5**	**22.7**
Total	4		8		10		**22**	
Condom use over the past 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Every time	52	92.9	100	80.6	55	70.5	**207**	**80.2**
Almost every time	2	3.6	20	16.1	20	25.6	**42**	**16.3**
Sometimes	2	3.6	4	3.2	3	3.8	**9**	**3.5**
Never	0	0.0	0	0.0	0	0.0	**0**	**0.0**
Total	56		124		78		**258**	

[1] Only those who had sexual intercourse in the last 12 months with a commercial partner are included
[2] Only those who used a condom are included
[3] Only those who did not use a condom are included

4.3.3. Condom use with non-regular partner

Reported condom use at the last sexual contact with a non-regular partner was 75%. Once again, the men rarely mentioned that this happened on their partner's initiative (4.3%). Of those men who reported not using a condom, the reason most frequently given was that they didn't think it

was necessary (42.7%). Some mentioned that they didn't like it (14.6%), that condoms were not available (10.4%) or that they didn't think of it (10.4%). Fifty-nine percent of men said they always or almost always used a condom with a non-regular partner and 41% responded 'sometimes' or 'never'.

Table 3.3: Condom use with most recent non-regular partner[1]

Characteristic	Livingstone		Chirundu		Chipata		Total	
Condom use at last sexual contact	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	44	71.0	69	77.5	28	73.7	**141**	**74.6**
No	18	29.0	20	22.5	10	26.3	**48**	**25.4**
Total	62		89		38		**189**	
Who suggested condom use[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Myself	29	65.9	44	63.8	19	70.4	**92**	**65.7**
My partner	1	2.3	3	4.3	2	7.4	**9**	**4.3**
Joint decision	14	31.8	22	31.9	6	22.2	**42**	**30.0**
Total	44		69		27		**140**	
Reason for no condom use[3]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Not available	0	0.0	1	20.0	4	40.0	**5**	**10.4**
Too expensive	0	0.0	0	0.0	0	0.0	**0**	**0.0**
Partner objected	2	11.1	2	10.0	0	0.0	**4**	**8.3**
Don't like them	1	5.6	4	20.0	2	20.0	**7**	**14.6**
Used other contraceptive	2	11.1	1	5.0	0	0.0	**3**	**6.3**
Didn't think it was necessary	9	50.0	8	40.0	3	30.0	**20**	**41.7**
Didn't think of it	2	11.1	1	5.0	2	20.0	**5**	**10.4**
Itching	0	0.0	1	5.0	0	0.0	**1**	**2.1**
Other	3	16.7	0	0.0	0	0.0	**3**	**6.3**
Total	18		20		10		**48**	
Condom use over the past 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Every time	27	44.3	49	55.1	18	47.4	**94**	**50.0**
Almost every time	9	14.8	5	5.6	3	7.9	**17**	**9.0**
Sometimes	11	18.0	21	23.6	12	31.6	**44**	**23.4**
Never	14	23.0	14	15.7	5	13.2	**33**	**17.6**
Total	61		89		38		**188**	

[1] Only those who had sexual intercourse in the last 12 months with a regular partner are included
[2] Only those who used a condom are included
[3] Only those who did not use a condom are included

4.4. Knowledge and availability of condoms

Table 4 presents the data on knowledge and availability of the male condom.

With the exception of eight men, all of the men (99.1%) had heard of male condoms. Almost two-thirds of these reported to have used a condom (63.2%). Almost all (96.9%) of the men who had heard of condoms knew where they could be obtained. Those who knew where to obtain condoms most frequently mentioned shops (76.4%), a clinic or hospital (63.5%), a bar, guesthouse or hotel (53.0%) and pharmacies (39.5%) as sources of condoms. The market (24.2%), friends (14.7%), family planning clinics (11.5%) and peer educators (4.7%) were mentioned less frequently. Almost all men (97.6%) reported that they could obtain condoms in less than one hour. When asked about where to get condoms, the men in all three sites answered similarly and no statistically significant differences were detected.

Table 4: Knowledge and availability of male condoms

Characteristic	Livingstone		Chirundu		Chipata		Total	
Ever heard of a condom	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	270	99.3	291	100.0	291	98.0	**852**	**99.1**
Total	272		291		297		**860**	
Ever used a condom[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	162	62.1	221	78.1	140	49.3	**523**	**63.2**
Total	261		283		284		**828**	
Knows where to obtain condoms [1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	261	96.7	283	98.3	279	95.9	**823**	**96.9**
No	9	3.3	5	1.7	12	4.1	**26**	**3.1**
Total	270	31.8	288		291		**849**	
Places or persons where condoms can be obtained[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Shop	208	79.7	211	74.6	210	75.3	**629**	**76.4**
Pharmacy	122	46.7	108	38.2	95	34.1	**325**	**39.5**
Market	53	20.3	69	24.4	77	27.6	**199**	**24.2**
Clinic	131	50.2	131	46.3	126	45.2	**388**	**47.1**
Hospital	108	41.1	90	31.8	151	54.1	**349**	**42.4**
Clinic/hospital	167	64.0	164	58.0	192	68.8	**523**	**63.5**
Family Planning Centre	24	9.2	26	9.2	45	16.1	**95**	**11.5**
Bar/guesthouse/hotel	145	55.6	138	48.8	153	54.8	**436**	**53.0**
Peer educator	13	5.0	17	6.0	9	3.2	**39**	**4.7**
Friend	34	13.0	46	16.3	41	14.7	**121**	**14.7**
Other	48	18.4	38	13.4	20	7.2	**106**	**12.9**

Characteristic	Livingstone		Chirundu		Chipata		Total	
Total	261		283		279		**823**	
Delays in obtaining condoms [2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Under 1 hour	238	98.3	269	98.2	259	96.3	**766**	**97.6**
1 hour to 1 day	3	1.2	5	1.8	10	3.7	**18**	**2.3**
More than 1 day	1	0.4	0	0.0	0	0.0	**1**	**0.1**
Total	242		274				**785**	

[1] Those who never heard of a male condom are excluded

[2] Those who never heard of a condom and those who do not know where to obtain a condom are excluded

4.5. Knowledge and behaviour related to STDs

Table 5 presents the men's knowledge of STDs and their behaviour when experiencing STD symptoms.

4.5.1. STD Knowledge

Most men (96.2%) had heard of 'diseases that can be transmitted through sexual intercourse'. Eighty-six percent of these men could mention at least one STD symptom in men and 73.3% could mention at least two. The most well known STD symptoms in men were genital sores or ulcers (65.9%) and genital discharge (65.1%). Two-thirds of these men (65.2%) could mention at least one STD symptom in women, and 51.5% at least two. The most well known symptoms in women were genital discharge (48.7%) and genital ulcers or sores (37.9%). There were no major differences between sites, although drivers passing through Livingstone had slightly better knowledge of STD symptoms than drivers in Chipata.

Table 5.1: Knowledge of STDs

Characteristic	Livingstone		Chirundu		Chipata		Total	
Ever heard of STDs	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	266	97.4	278	96.2	281	94.9	**825**	**96.2**
No	7	2.6	11	3.8	15	5.1	**33**	**3.8**
Total	273		289		296		**858**	
STD symptoms in women known[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Abdominal pain	72	27.1	85	30.6	86	30.6	**243**	**29.5**
Genital discharge	94	35.3	106	38.1	109	38.8	**3.9**	**37.5**
Foul smelling discharge	72	27.1	66	23.7	73	26.0	**211**	**25.6**
Any discharge	128	48.1	132	47.5	142	50.5	**402**	**48.7**
Burning pain on urination	33	12.4	39	14.0	72	25.6	**144**	**17.5**
Genital ulcers/scores	87	32.7	87	31.3	139	49.5	**313**	**37.9**
Swellings in groin area	33	12.4	39	14.0	61	21.7	**133**	**16.1**
Genital itching	25	9.4	31	11.2	40	14.2	**96**	**11.6**
Total	266		278		281		**825**	
# of STD symptoms in women known[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
0	112	42.1	99	35.6	76	27.0	**287**	**34.8**
1	29	10.9	49	17.6	35	12.5	**113**	**13.7**
2	45	16.9	48	17.3	59	21.0	**152**	**18.4**
3	43	16.2	46	16.5	51	18.1	**140**	**17.0**
4	27	10.2	22	7.9	40	14.2	**89**	**10.8**
4+	10	3.8	14	5.0	20	7.1	**44**	**5.3**
Total	266		278		281		**825**	
STD symptoms in men known[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Genital discharge	193	72.6	200	71.9	144	51.2	**537**	**65.1**
Burning pain on urination	97	36.5	113	40.6	108	38.4	**318**	**38.5**
Genital ulcer/sores	174	65.4	182	65.5	188	66.9	**544**	**65.9**
Swellings in groin area	102	38.3	113	40.6	95	33.8	**310**	**37.6**
Total	266		278		281		**825**	
# of STD symptoms in men known[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
0	43	16.2	33	11.9	41	14.6	**117**	**14.2**
1	24	9.0	30	10.8	49	17.4	**103**	**12.5**
2	82	30.8	97	34.9	109	38.8	**288**	**34.9**
3	90	33.8	88	31.7	60	21.4	**238**	**28.8**
4	27	10.2	30	10.8	22	7.8	**79**	**9.6**
Total	266		278				**825**	

[1] Those who never heard of STDs are excluded.

STD Behaviour

About one-tenth of the men (9.2%) reported having either a genital discharge (7.2%) or genital ulcers or sores (5.8%) in the past 12 months. Two-thirds (69.1%) of these sought advice at a health facility, be it a government (62.5%), a private (54.2%), a workplace (23.6%) or a church-run (9.7%) facility. One-quarter (25.0%) sought advice from a traditional healer, 18.1% from a pharmacist, 8.3% bought capsules on the street and 12.5% took medicines at home. Slightly more than one-third (37.5%) said they told their partner, 44.4% stopped having sex and 22.2% used condoms while symptomatic. The number of men who reported STD symptoms was too few to allow for a meaningful comparison between sites.

Table 5.2: Behaviour related to STDs

Characteristic	Livingstone		Chirundu		Chipata		Total	
History of STD symptoms in the past 12 months	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Genital discharge	15	5.5	21	7.3	26	8.8	**62**	**7.2**
Genital ulcer sores	13	4.8	17	5.9	20	6.8	**50**	**5.8**
Genital discharge or ulcers/sores	21	7.7	26	9.0	32	10.8	**79**	**9.2**
Total	273		289		296		**858**	
Behaviour the last time had STD symptoms [1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Seek advice from a government health facility	8	40.0	16	66.7	21	75.0	**45**	**62.5**
Seek advice from a workplace health facility	2	10.0	5	20.8	10	35.7	**17**	**23.6**
Seek advice from a church or charity run health facility	2	10.0	3	12.5	2	7.1	**7**	**9.7**
Seek advice from a private health facility	16	80.0	11	45.8	12	42.9	**39**	**54.2**
Seek advice at any of the 4 above	16	84.2	14	60.9	17	65.4	**47**	**69.1**
Seek advice from a pharmacist	4	20.0	5	20.8	4	14.3	**13**	**18.1**
Seek advice from a traditional healer	2	10.0	2	8.3	14	50.0	**18**	**25.0**
Bought capsules on the street	0	0.0	2	8.3	4	14.3	**6**	**8.3**
Took medicine at home	1	5.0	1	4.2	7	25.0	**9**	**12.5**
Tell partner about the symptoms	3	15.0	10	41.7	14	50.0	**27**	**37.5**
Stop having sex while symptomatic	8	40.0	6	25.0	18	64.3	**32**	**44.4**
Always use condom while symptomatic	3	15.0	3	12.5	10	35.7	**16**	**22.2**
Total	20		24		28		**72**	

[1] Only those who reported STD symptoms are included

4.6. Knowledge, opinions and attitudes related to HIV

Table 6 presents the data on knowledge, opinions and attitudes related to HIV.

Almost all men, with the exception of ten, had heard of HIV/AIDS. Most of the men (81.3%) also knew someone who was living with HIV/AIDS. For 87.4% of these men, this was a close relative (26.3%), a close friend (33.4%) or both (27.7%). The men generally knew that HIV could be transmitted by infected needles (94.8%) or from mother to child during pregnancy (91.3%). The fact that HIV could also be transmitted through breastfeeding was not as widely known (69.0%). Still 17.2% of the men thought mosquito bites could transmit HIV and 6.4% believed that one could get infected by sharing meals. Most men (95.6%) were aware that a healthy looking person could be infected with HIV. The best known method for preventing HIV was abstinence (90.3%), followed by faithfulness (84.3%) and condom use (75.5%). Only 10.5% of those who knew that HIV could be transmitted from mother to child also knew that treating pregnant infected women could prevent this transmission of infection.

Table 6: Knowledge, opinions and attitudes related to HIV

Characteristic	Livingstone		Chirundu		Chipata		Total	
Ever heard of HIV	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	273	100.0	289	100.0	286	96.6	**848**	**98.8**
No	0	0.0	0	0.0	10	3.4	**10**	**1.2**
Total	273		289		296		**858**	
Knows someone with HIV/AIDS[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	227	83.2	244	84.4	218	76.2	**689**	**81.3**
No	42	15.4	38	13.1	65	22.7	**145**	**17.1**
Don't know	4	1.5	7	2.4	3	1.0	**14**	**1.7**
Total	273		289		286		**848**	
Has close relative or friend with HIV/AIDS[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Close relative	60	26.4	60	24.6	61	28.0	**181**	**26.3**
Close friend	78	34.4	97	39.8	55	25.2	**230**	**33.4**
Both	63	27.8	71	29.1	57	26.1	**191**	**27.7**
No	26	11.5	16	6.6	45	20.6	**87**	**12.6**
Total	227		244		218		**689**	
Thinks that a person can get HIV from[1]:	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Mosquito bites	43	15.8	51	17.6	52	18.2	**146**	**17.2**
Sharing meals	15	5.5	26	9.0	13	4.5	**54**	**6.4**
Infected needles	258	94.5	278	96.2	268	93.7	**804**	**94.8**
Mother to child during pregnancy	250	91.6	271	93.8	253	88.5	**774**	**91.3**
Breast feeding	187	68.5	201	69.6	197	68.9	**585**	**69.0**
Total	273		289		286		**848**	

Characteristic	Livingstone		Chirundu		Chipata		Total	
Knows that people can prevent HIV by[1]:	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Condom use	213	78.0	225	77.9	202	70.6	**640**	**75.5**
Faithfulness	226	82.8	244	84.4	244	85.6	**714**	**84.3**
Abstinence	254	93.0	255	88.2	257	89.9	**766**	**90.3**
Treating pregnant infected women[3]	11	4.4	40	14.8	30	11.9	**81**	**10.5**
Total	273		289		285		**848**	
Knows that a healthy looking person can be infected[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	261	95.6	276	95.5	274	95.8	**811**	**95.6**
No	10	3.7	9	3.1	6	2.1	**25**	**2.9**
Don't know	2	0.7	4	1.4	6	2.1	**12**	**1.4**
Total	273		289		286		**848**	

[1] Those who never heard of HIV are excluded.
[2] Only those who know someone with HIV/AIDS are included
[3] Only those who know HIV can be transmitted from mother to child are included. N = 774 (Livingstone 250, Chirundu 271 and Chipata 253)

4.7. HIV Voluntary counselling and testing (HIV VCT)

Table 7 presents the data on HIV voluntary counselling and testing.

Most men (92.0%) reported having access to a voluntary counselling and testing facility. More than a quarter (29.8%) said they had been tested. Of these, about one- third (34.5%) said it was not on a voluntary basis, and 9.1% never found out the test result.

Table 7. HIV Voluntary counselling and testing

Characteristic	Livingstone		Chirundu		Chipata		Total	
Access to confidential testing for HIV[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	245	89.7	275	95.2	260	90.9	**780**	**92.0**
No	17	6.2	11	3.8	10	3.5	**38**	**4.5**
Don't know	11	4.0	3	1.0	16	5.6	**30**	**3.5**
Total	273		289		286		**848**	
Ever been tested[1]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	98	36.0	90	31.1	64	22.4	**252**	**29.8**
Total	272		289		286		**847**	
Voluntary tested[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	63	64.3	56	62.2	46	71.9	**165**	**65.5**
No	35	35.7	34	37.8	18	28.1	**87**	**34.5**
Total	98		90		64		**252**	
Found out the result[2]	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**
Yes	88	89.8	82	91.1	59	92.2	**229**	**90.9**
No	10	10.2	8	8.9	5	7.8	**23**	**9.1**
Total	98		90		64		**252**	

[1] Those who never heard of HIV are excluded. [2] Only those who were tested are included

4.8. Project indicators

The study serves as a baseline for the project implemented by World Vision International. Five behavioural indicators were identified. Table 8 presents the results of the indicators.

One of the indicators measures knowledge of STD symptoms; 70.5 % of the men could cite at least two major STD symptoms in men. The following were considered as major STD symptoms: genital discharge, genital ulcers or sores, swelling in the groin area and burning pain when urinating. The second indicator measures knowledge of HIV prevention; 89.4 % could mention at least two HIV prevention strategies. The following were considered HIV prevention strategies: condom use, faithfulness, abstinence and treating pregnant women.

The third indicator measures condom availability; 97.6% reported easy access to condoms. The ability to obtain a condom in less than one hour was considered "easy access." The men who did not know the delay period were excluded. The fourth indicator measures condom use with commercial sex partners; 91.5% of the men reported that they used a condom in the last commercial sex act. The fifth indicator measures condom use with casual partners; 74.6% of the men reported that they used a condom in the last sex act with a non-regular partner. The

difference in results on the indicators in the three sites was not statistically significant ($p<0.05$) when the design effect was taken into account (design effect=2).

Table 8: Project indicators

Characteristic	Livingstone		Chirundu		Chipata		Total		
% who can correctly cite two major STD symptoms	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**	**95% CI**
1	199	72.9	215	74.4	191	64.5	**605**	**70.5**	**65.9-74.7**
2	74	27.1	74	25.6	105	35.5	**253**	**29.5**	**25.3-34.1**
Total	273		289		296		**858**		
% who can correctly cite two HIV prevention strategies	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**	**95% CI**
1	248	90.8	261	90.3	258	87.2	**767**	**89.4**	**86.0-92.1**
2	25	9.2	28	9.7	38	12.8	**91**	**10.6**	**7.9-14.0**
Total	273		289		296		**858**		
% who reported easy access to condoms	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**	**95% CI**
1	239	98.4	269	98.2	259	96.3	**767**	**97.6**	**95.4-98.8**
2	4	1.6	5	1.8	10	3.7	**19**	**2.4**	**1.2-4.6**
Total	243		274		269		**786**		
% who reported condom use in last commercial sex act	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**	**95% CI**
1	52	92.9	116	93.5	68	87.2	**236**	**91.5**	**84.9-95.5**
2	4	7.1	8	6.5	10	12.8	**22**	**8.5**	**4.5-15.1**
Total	56		124		78		**258**		
% who reported condom use in last casual sex act	**n**	**%**	**n**	**%**	**n**	**%**	**n**	**%**	**95% CI**
1	44	71.0	69	77.5	28	73.7	**141**	**74.6**	**64.4-82.7**
2	18	29.0	20	22.5	10	26.3	**48**	**25.4**	**17.3-35.6**
Total	62		89		38		**189**		

5. DISCUSSION

5.1. Participant selection and sample size

The desired sample size was calculated at 722, with non-response estimated at 25%. Therefore, 900 drivers were sampled. The non-response rate was lower than expected and investigators were able to recruit a larger sample than foreseen. However, the sample size calculation assumed that about 37% of the respondents would report having non-regular partners in the past 12 months, which would give a sufficiently large sub-sample of 267 to allow for comparison over time. Since only 21% of respondents reported having a non-regular partner, the sub-sample obtained (189) was smaller than expected. This will slightly reduce the statistical power to detect trends.

5.2. Socio-demographic profile of the study population

The population of truck drivers in our study is mostly middle aged, with the majority being in their thirties or above. Half are Zambians, half are from neighbouring countries, mostly Zimbabwe, and most are from urban areas. Most drivers are married and living with their spouse and, as far as Zambians are concerned, have an educational level comparable to other urban Zambian men as described in the 1996 DHS. The men were not asked about the amount of time they travelled in great detail. One-third said they travelled little (less than one month a year) and most passed the border at least once a month.

5.3. Sexual behaviour

Almost all respondents were sexually active. The age at which they started sexual activity (18 years) is slightly higher than the 16.5 years reported by Zambian men in the 1996 DHS. About half of the men reported having more than one sexual partner in the past year. This is clearly higher than what men from the general population report in Zambia (about 20% reported more than one partner in the 1996 DHS and the 1998 SBS[1]) and confirms the relatively high-risk profile of this population. Almost all of the drivers who reported sexual partners in the past year considered one or more of these partners as regular partners.

Thirty percent of the men reported frequenting a sex worker in the past year. This is slightly higher than what was reported by men in the general population in the 1996 DHS (24%). It is possible, however, that the criteria used for 'commercial' sex in the DHS was broader than the criteria used in our survey. The interviewers had the impression that contacts with sex workers tended to be under-reported.

Partners who were considered as non-regular and non-commercial were more rarely mentioned. Only 22% reported having such a partner, a similar proportion to the ones reporting more than one regular partner. This may be explained by the fact that many truck drivers may have a partner they frequent on their travels and whom they consider regular.

The frequency of sexual intercourse was the highest with the regular partner, but more than half of the truck drivers who reported a commercial and/or a non regular partner said they had sexual

[1] Zambia Sexual Behavior Survey 1998. Central Statistic Office, Republic of Zambia and MEASURE Evaluation.

intercourse more than one time in the past month with this partner. One-third reported a sexual contact more than twice (results not shown). This indicates that many of these 'occasional' partners are visited on a regular basis.

5.4. Condom use

Condom use with a regular partner was, as expected, quite low. About one-fifth of the men (18.5%) used a condom at the last sexual act and only 29% said they used a condom at least sometimes. These figures are significantly higher, however, than what was found in the 1996 DHS in which only 8% of men reported condom use with their spouse at the last sex act.

Condom use with commercial and non-regular partners was much higher. More than 90% of the men who frequented a sex worker claimed they had used a condom at the last encounter and 80% claimed that they always use a condom with a sex worker. Three-quarters of the men who had a non-regular partner said they had used a condom at the last sex act and more than half said they did this always or almost always. This is again markedly higher than reports from the 1996 DHS and the 1998 SBS. Reported condom use in the last commercial sex act is a WVI project indicator and given the reported current high rate of condom use already existing in the study population, significant increases will be hard to achieve. Maintaining high reported condom use rates will be a key priority of the project.

In the majority of cases, the drivers claimed that it was either they who suggested condom use or that it was a joint decision. This was particularly the case for sexual contacts with sex workers and less so with regular partners. The reasons for not using a condom varied by type of partner, with most drivers believing that it is not necessary to use a condom with a regular partner and, to a lesser extent, with a non regular, non-commercial partner. The number of drivers who did not use a condom with a commercial or non-regular partner was limited and it is difficult to draw any conclusions. In general, lack of availability of condoms or costs did not seem to be major reasons for not using condoms. Almost all drivers said that they could have a condom in less than one hour, if needed. This is a WVI project indicator that be difficult to improve upon.

5.5. Sexually transmitted diseases

Almost all drivers have heard about STDs, but when asked whether they can list STD symptoms, 14% are not able to mention any and only 10% mentions spontaneously all four major STD symptoms in men (genital discharge, genital ulcers, dysuria and inguinal swelling).

About 7% reported having a genital discharge and 6% a genital ulcer in the past year. This is comparable, although slightly higher, to reports from the 1996 DHS and 1998 SBS in which about 4% of men reported genital discharge and 3% and 5% respectively reported a genital ulcer.

Care seeking behaviour for STD symptoms was similar to findings in other studies of STD care seeking in African men. Still 30% of the symptomatic drivers do not seek care at a health facility. Traditional healers and pharmacies remain important care providers. Most drivers do not inform their partners or change their sexual behaviour when symptomatic.

5.6. Knowledge and attitudes related to HIV

Knowledge regarding modes of transmission and prevention strategies was generally good. At this stage, almost all men know about HIV/AIDS, know that healthy looking persons can be infected and most know that infection can be prevented by abstinence, faithfulness or condom use, although one quarter still has doubts about the efficacy of condom use. The percentages of men who knew three ways to prevent HIV infection are much higher than percentages found in the 1996 DHS, where only 39.6%, 48.6%, and 49.3% of men knew that they could avoid HIV by abstinence, faithfulness or condom use respectively. This could be explained by our study population who is more at risk and therefore better informed, but also by the fact that the questions in our questionnaire were asked in a prompted way. This could also explain why a large proportion reported that HIV could be transmitted by mosquito bites or sharing meals. The proportion of drivers who can cite two HIV prevention strategies measures the WVI project's indicator on HIV knowledge. This proportion is already high at baseline (89.4%) and significant improvement may be difficult to achieve.

The fact that an infected pregnant woman and, to a lesser extent, a breastfeeding mother can infect her child is becoming more widely known, but only a small proportion of the drivers knew that treating pregnant women could prevent these infections. This is probably because the therapy to prevent mother to child transmission is still not available in Zambia.

5.7. HIV Voluntary counselling and testing

A high proportion (92%) of the drivers said that they had access to confidential testing. This question was not specified further in the questionnaire, and it is not clear what type of testing facilities they are referring to. Because of the high mobility of these men, it is also difficult to know in which country and town these testing opportunities are available. Thirty percent said they had already been tested once, and about one-third of these said it was not on a voluntary basis. Nine percent never found out the test result. The questionnaire did not ask the reasons for testing if not voluntary, or why they never found out the result. More in-depth qualitative research may be needed to explore these questions.

5.8. Generalizability to other sites

Only three of the five project sites were included in the sample. This was partly for convenience, but mostly to avoid duplication of drivers who cross the country. The sample size was not calculated to allow for comparison between sites. In general, socio-demographic and behavioural characteristics were quite similar between the sites. Only the country of origin, the frequency of travelling, the number of sexual partners and, to a lesser extent, the knowledge of STDs was different by site. For the number of sexual partners, this difference was statistically significant ($p=0.05$) even when the design effect is taken into the account. Drivers passing through Chirundu seem to have a higher risk profile. For STD knowledge as measured by the first project indicator, statistical significance was only reached if the design effect were not taken into account. The great similarities between the truck driver populations at the three sites give us reasons to believe that the sample is quite representative for long distance truck drivers travelling along the major transport routes in Zambia.

5.9. Comparison with results from sex worker survey

Simultaneously with the truck driver's survey, investigators interviewed female sex workers operating at the same border post, using a similar questionnaire. The results of this survey are presented in a separate report (*Round 1 Behavioral and Biologic Surveillance Survey Zambia 2000: Female Sex Workers)*

When comparing responses from sex workers and truck drivers, there was a clear difference in reported condom use with commercial sex partners. The truck drivers reported a 92% use at the last commercial sex contact, while sex workers only reported a 54% use. Ninety-six percent of truck drivers also claimed that they always used or almost always used condoms for commercial sex, while only 25% of sex workers reported this. Only 7% of the truck drivers reported that it was the sex worker who suggested condom use, while 62% of the sex workers reported that they suggested using a condom. This discrepancy could be because truck drivers are only a part of the sex worker's clientele (particularly in bigger towns such as Livingstone and Chipata) and truck drivers frequent sex workers at sites other than the interview site. However, it is likely that at least part of the discrepancy is explained by reporting bias by one or both groups.

Both groups answered similarly on knowledge and availability of the male condom. Sex workers seem to procure condoms more often at the market, while truck drivers get condoms from pharmacies and friends. A similar proportion knew about STDs and, not surprisingly, sex workers were more familiar with the symptoms in women and drivers with symptoms in men. The sex workers had a better STD care-seeking profile than drivers did. They more frequently sought advice from a health facility, told their partner and more often changed their behaviour when symptomatic. Knowledge, opinions and attitudes related to HIV were similar, although sex workers more often knew that breastfeeding can transmit HIV and that treating a pregnant woman can prevent infection. The truck drivers more frequently reported access to confidential HIV testing than the sex workers. They also were more often tested voluntarily and learned their result. This can be explained by the higher mobility of the truck drivers who have access to testing facilities in a wider area.

6. CONCLUSION

The truck driver population found at the three sites was international, urban, middle aged, mostly married and similar to the general population in terms of educational level and religion. Most of the men spent a significant amount of their time on the road.

About half of them could be considered as having high-risk sexual behaviour, with multiple sex partners. Knowledge and behaviour related to HIV and STDs was generally good and condoms were reported to be available. Condom use was reported to be very high with commercial sex partners, moderately high with non-regular partners, and low with regular partners. This, in part, conflicts with reports from commercial sex workers operating at the sites where these drivers pass through. Knowledge and behaviour on STD symptoms can be improved and the availability and use of counselling and testing facilities needs to be explored.

The WVI project should focus on behaviour change through peer and other education methods, and on increasing condom use both with commercial and casual partners. Knowledge and care seeking for STD symptoms could be improved by: behaviour change activities; improving access

to and quality of selected health facilities at the truck stops; developing treatment facilities at the trucking companies; involving non-formal service providers such as private practitioners and pharmacists; and providing treatment facilities at the truck stops outside the health facilities. The possibility for offering HIV VCT facilities should be further explored.

7. ANNEX

FAMILY HEALTH INTERNATIONAL (FHI)
HIV/AIDS/STD BEHAVIORAL SURVEILLANCE SURVEYS (BSS)

Questionnaire
FOR LONG DISTANCE TRUCK DRIVERS
ZAMBIA - 2000

FAMILY HEALTH INTERNATIONAL (FHI)
HIV/AIDS/STD BEHAVIORAL SURVEILLANCE SURVEYS (BSS)
FOR LONG DISTANCE TRUCK DRIVERS
ZAMBIA - 2000

001 QUESTIONNAIRE IDENTIFICATION NUMBER |___|___|___|

002 TOWN: Livingstone

003 PROVINCE_____

004 SITE_____

Introduction: "My name is… I'm working for Tropical Diseases Research Center and Family Health International. We're interviewing people here in [name of city, region or site] in order to find out about people's HIV/AIDS attitudes, knowledge, opinion, and risk behavior. Have you been interviewed in the past few weeks for this study? **IF THE RESPONDENT HAS BEEN INTERVIEWED BEFORE, DO NOT INTERVIEW THIS PERSON AGAIN.** Tell them you cannot interview them a second time, thank them, and end the interview. If they have not been interviewed before, continue:

Confidentiality and consent: "I'm going to ask you some very personal questions that some people find difficult to answer. Your answers are completely confidential. Your name will not be written on this form, and will never be used in connection with any of the information you tell me. You do not have to answer any questions that you do not want to answer, and you may end this interview at any time you want to. However, your honest answers to these questions will help us better understand what people think, say and do about certain kinds of behaviors. We are only talking with Long Distance Drivers. Do you qualify? We would greatly appreciate your help in responding to this survey. The interview will take about 30 minutes to ask the questions. Would you be willing to participate?"

_____

(Signature of interviewer certifying that informed consent has been given verbally by respondent)

Interviewer visit

	Visit 1	Visit 2	Visit 3
Date			
Interviewer			
Result			

Result codes: Completed 1; Respondent not available 2; Refused 3; Partially completed 4; Not complete due to language 5; Other 6.

005 INTERVIEWER: Code [____|____] Name_____

006 DATE INTERVIEW: __\ ____ _____

007 LANGUAGE USED _____

CHECKED BY SUPERVISOR: Signature _____ Date _____

AKATIMU: Dzinai langa ndine ……..Digwila nchito kwa …….. Tikuzuwisani inu anthu kuno…….chura dzimna ya kwamene mukala. Kpena mutauni komboni kapena uchura kuti kupoto olo kumwela. Kuti tiziwe bwino momwe tinga peukele matenda akachilombo kapena unena kuti AIDS. Kodi ana kuziwisakona pamasabata ochepa apita kubuyoku. Pazamatenda ya HIV/AIDS? Kodi mwatunsi dwa po kale mufunsu, oligwan na aya kwa milungu ingono yapita. Pakuti muna finsidwa kale sitiza kufunsani kachiwili. Zikhomo.

ZACHISISI: Chisnisi ndi chivomelezo: "Ndiza kufusani mafunso a chisinsi yamene anthu ena apeza mabvuto kuyanka. Mayankho anu azankhala achinsisi kwanbili. Anga khale zina lanu siliza lembedwa papepa laii. Ndipo chisis chanu chonse chomwe muzaniuza sichizalembvwa. Silizangwilisilidwa nchito ndi mau alionse mudzaniliaza ine. Simukupalikizwa kunyanka mafunso yame ne simufuna kuyanka, ndipo mulinampabvu zosiliza kufunsa uku panthawi iliyonse yamene mwafuna. Koma mayanko anu yapansi pamutima kumafunso aya azatitandiza ife kunvesesa kwambili chimena anthu aganiza, akamba ndi kuchita pa minkalidwe ina. Tikamba chambe ndi amuna ondesa magalimoto amaulenda autali. Kodi mujuena? /takamba chabe pa mkazi wachiwele wele ofuna ndalama uchokela nsira zauchelewele. Kapena unenakuti chigonegone.Tiza oonga kwambili kutandizo lanu mukuyanka mafunso aya. Mafunso aya azalenga chifupi fupi mpindi akumu atatu kodi mungafune upezekako – kapena kuti 30 minutes. Kodi munyafune ku lenga mabli (kuyanka).

_____

(Signature of interviewer certifying that informed consent has been given verbally by respondent)

The ADULT questionnaire includes the following sections:

Section 0 – Questionnaire identification data (6 codes)	
Section 1 – Background characteristics	13 questions
Section 2 – Marriage	4 questions
Section 3 – Sexual history: numbers and types of partners	4 questions
Section 4 – Sexual history: regular partners	6 questions
Section 5 – Sexual history: non-regular partners	6 questions
Section 6 – Sexual history: commercial partners	6 questions
Section 7 – Male and female condoms	7 questions
Section 8 – STDs	5 questions
Section 9 – Knowledge, opinions, and attitudes towards HIV/AIDS	16 questions
TOTAL NUMBER OF QUESTIONS:	**77 questions**

FHI 1999 HIV/AIDS/STD BEHAVIORAL SURVEILLANCE SURVEY (BSS) FOR ADULTS

Section 1: Background characteristics

No.	Questions and filters	Coding categories	Skip to
Q101	In what month and year were you born? Kodi mwadzi uti ndi chaka chomwe munabadwa?	MONTH [__|__] DON'T KNOW MONTH 88 NO RESPONSE 99 YEAR [__|__] DON'T KNOW YEAR 88 NO RESPONSE 99	
Q102	How old were you at your last birthday? Kuchokela mchaka unabadwa ndi mwezi uli ndi zaka zingati? **(COMPARE AND CORRECT Q102 IF NEEDED)**	AGE IN COMPLETED YEARS [__|__] DON'T KNOW 88 NO RESPONSE 99 **ESTIMATE BEST ANSWER**	
Q103	Have you **ever** attended school? Kodi unapita kusukulu?	YES 1 NO 2 NO RESPONSE 9	® **Q106**
Q104	What is the highest level of school you completed: primary, secondary or higher? Kodi mapunzilo yoko, ndiyapamwamba bwansi? **CIRCLE ONE**	PRIMARY 1 SECONDARY 2 HIGHER 3 NONE 4 NO RESPONSE 9	
Q105	How many total years of education have you completed up to now? Kodi ndizaka nzingati zomwe watsiliza pamapunzilo yako?	# YEARS COMPLETED [__|__] NO RESPONSE 99	
Q106	In the last 12 months have you been away from your home for more than one month altogether? That is since last March. Kwa mwedzyi khumi ndi yiwili unachokapo pamubzi kupitilaa mwedzi?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	

No.	Questions and filters	Coding categories	Skip to
Q107	How many times have you come through this border in the past 3 months, that is since the beginning of last October? Ndikanga upita pamalile ya kwa mwedzi itatu yaku mbuyoku tachoka kuchokela mwedzi itatu yaku mbuyoku tachoka kuchokela mwedzi wa kapalepale?	NUMBER TIMES SINCE LAST NOVEMBER [__|__] DON'T KNOW 88 NO RESPONSE 99	
Q108	What religion are you? Ndimaiko yoti komwe muchokela? **CIRCLE ONE**	Christian 1 Muslim 2 Buddhist 3 Hindu 4 Traditionalist 5 Other specify _____ 6 NO RELIGION 0 NO RESPONSE 9	
Q109	What is your country of origin? Ndidziko liti? **CIRCLE ONE**	South Africa 1 Somalia 2 Malawi 3 Zimbabwe 4 Tanzania 5 Kenya 6 Mozambique 7 Congo DR 8 Botswana 10 Zambia 11 Other specify _____ 12 NO RESPONSE 9	
Q110	Is your permanent home located in a village or city? Ndimudzi wako wako? **CIRCLE ONE**	Village 1 City 2 DON'T KNOW 8 NO RESPONSE 9	

No.	Questions and filters	Coding categories	Skip to
Q111	During the last 4 weeks how often have you had drinks containing alcohol? Would you say ….**..READ OUT** **CIRCLE ONE** Kwa masabata anayi apitakubuyokui ndikangati mwamwa to imwa imwa kapena mowa?	Every day 1 At least once a week 2 Less than once a week or never 3 DON'T KNOW 8 NO RESPONSE 9	
Q112	Some people have tried a range of different types of drugs. Which of the following, if any, have you tried? **READ LIST** Anthu ena osiyanasiyana ayesa kupeza njila zosin siyana kupeza munkhwala yosina siyana, chosatila chisowa?	YES NO DK NR Daga (Icamba**)** 1 2 8 9 Heroin 1 2 8 9 Cocaine 1 2 8 9 Mandrax 1 2 8 9 Other _____	

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Section 2 Marriage and live -in partnerships

No.	Questions and filters	Coding categories	Skip to
Q201	Have you ***ever*** been married? Kodi unakwatilapo?	YES 1 NO 2 NO RESPONSE 9	 ® **Q203** ® **Q203**
Q202	How old were you when you first married? Unali ndi zaka zingati pamwe unayamba kukwatila?	Age in years [__|__] DON'T KNOW 88 NO RESPONSE 99	
Q203	Are you ***currently*** married or living with a man/woman with whom you have a sexual relationship? Tsopanoli uliokwatila kapena mwamuna ola mkazi wachisumbali?	currently married, living with spouse 1 currently married, living with other sexual partner 2 currently married, not living with spouse or any other sexual partner 3 not married, living with sexual partner 4 not married, not living with sexual partner 5 NO RESPONSE 9	® **Q204** ® **Q204** ® **Q204** ® **Q301** ® **Q301** ® **Q301**
Q204	IF MARRIED: Do you have more than one wife? Kodi ulindi phari?	YES 1 NO 2 NO RESPONSE 9	

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Section 3 Sexual history: numbers and types of partners

No.	Questions and filters	Coding categories	Skip to
Q301	Now I'd like to ask you some questions that *may be difficult and too personal to answer. But like I said at the beginning, your answers to these questions will be treated with strict confidentiality and will not be linked to you in any way. The questions that will follow will all be about your sexual activities and partners…* Have you *ever* had sexual intercourse? [For the purposes of this survey, "sexual intercourse," is defined as vaginal or anal sex.] ***ii) Would you tell me what types of sexual intercourse that you know of?*** ***iii) Of the types that you have mentioned, which one (s) have you used before?*** Unagonapo mukazi chfukwa inchi tilifufuza chigone gone, chanyanya chapita malile?	YES 1 NO 2 NO RESPONSE 9	® **Q703** ® **Q703**
Q302	At what age did you first have sexual intercourse? Unlindi musiku uti pomwe unayamba kugona mukazi?	AGE IN YEARS [__|__] DON'T KNOW 88 NO RESPONSE 99	
Q303	Have you had sexual intercourse in the last 12 months? That is since last March. Unagona ndi mukazi dwameezi nkhumu ndi iwili ya pita kubuku!	YES 1 NO 2 NO RESPONSE 9	® **Q702** ® **Q702**

No.	Questions and filters	Coding categories	Skip to
Q304	Think about the *female* sexual partners you've had in the last 12 months. How many were: - a) Your spouse(s) or live-in sexual partners ***("regular" partners)*** Kubulkila mukazi unagona naye kwameezi khumi ndiwili yakubuku. Kodi ningati ndikuti! - Okondendwa wako ali msumbamwako - b) ***"Commercial"*** (partners with whom you had sex in exchange for money) - Visumbali yogonanato ndiupatasa ndalama! - c) Sexual partners you that you are not married to and have never lived with and did not pay ***("non-regular" partners)*** – DO NOT INCLUDE CURRENT SPOUSE(S) OR LIVE-IN SEXUAL PARTNERS) - visumbali yogonava aja sunakwatile ndikukhala nawo cosalipila ----------	**REGULAR** [__|__] DON'T KNOW 88 NO RESPONSE 99 **COMMERCIAL** [__|__] DON'T KNOW 88 NO RESPONSE 99 **NON-REGULAR** [__|__] DON'T KNOW 88 NO RESPONSE 99	® **Q401** ® **Q401**

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Section 4 Sexual history: regular partners

No.	Questions and Filters	Coding categories	Skip to
Q401	**FILTER: CHECK Q304a** HAD SEX WITH REGULAR PARTNER DURING <u>PAST 12 MONTHS</u> …. [___] ↓ Ndagona ndivisumbali vaseli kwamelelzi khumi ndi wli yakumbuku?	DID NOT HAVE SEX WITH REGULAR PARTNER DURING <u>PAST 12 MONTHS</u> [__] →	**→Q501**
Q402	Think about your most recent regular sexual partner. How many times did you have sexual intercourse with this person over the last 30 days? *That is since the beginning of February.* Kumbukila omwe unagona naye lombada kumbu uku. Ni kangati wgona naye uyumunthu kwamasiku mankhumi atatu apita kumbuku? **[REGULAR PARTNER INCLUDES WIFE OR LIVE-IN SEXUAL PARTNER]**	Number of times |__|__ DON'T KNOW | NO RESPONSE 88 99	
Q403	The **last time** (round) you had sex with a regular partner, did you and your partner use a condom? Tsiku yosilinzira pamwe munagona pamodzi muna sewenzetsa mpika wa kondomu?	YES 1 NO 2 DON'T REMEMBER 8 NO RESPONSE 9	 **→Q405** **→Q406** **→Q406**
Q404	Who suggested using a condom that time? Anaganinzira uisenzetsa mpira pa nthawi ndani? **CIRCLE ONE**	Myself 1 My partner 2 Joint decision 3 NO RESPONSE 9	**→Q406** **→Q406** **→Q406** **→Q406**

No.	Questions and filters	Coding categories			Skip to
			Y	N	
Q405	Why didn't you and your partner use a condom that time? Any other reasons? Chifukwa ninsi iwe ndi mbumbali wako muna sewezesa mpila wako kondomu pa nthawi ija? **CIRCLE ALL ANSWERS MENTIONED**	Not available	1	2	
		Too expensive	1	2	
		Partner objected	1	2	
		Don't like them	1	2	
		Used other contraceptive	1	2	
		Didn't think it was necessary	1	2	
		Didn't think of it	1	2	
		Itching	1	2	
			1	2	
		Other_____	1	2	
		DON'T KNOW	1	2	
		NO RESPONSE			
Q406	In general, how often did you and your regular partner(s) use a condom during the past 12 months? That is since last March. Would you say every time, almost every time, sometimes or never Mzosezi zochitika inundi msumbali wany munaona bwansi usewezesa mpirea wakondomu kwameezi khomi ndi wili?	EVERY TIME		1	
		ALMOST EVERY TIME		2	
		SOMETIMES		3	
		NEVER		4	
		DON'T KNOW		8	
		NO RESPONSE		9	

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Section 5 Sexual history: commercial partners

No.	Questions and Filters	Coding categories	Skip to
Q501	**FILTER: CHECK Q304b** HAD SEXUAL INTERCOURSE WITH A COMMERCIAL PARTNER *(PERSON THEY PAID FOR SEX)* IN LAST 12 MONTHS…[___] ↓ Ndina gona munthu wachiwele wele olipilisa muchiwele wele wache kwa meezi khumi indi wiri yapita.	*HAS* NOT *HAD SEXUAL INTERCOURSE WITH A COMMERCIAL PARTNER IN LAST12 MONTHS*…. [__]→	→**Q601**
Q502	Think about your **most recent** commercial sexual partner *(someone you paid money for sex)*. How many times did you have sexual intercourse with this person over the last 30 days? That is since the beginning of February. Kumbukila wachiwele wele unagonanaye calombaapa omwe una upila ndalama? Ndika ngati una gonna ndi munthu yo kopitilira matsiku mahumi atatu?	Number of times |__|__| DON'T KNOW 88 NO RESPONSE 99	
Q503	The **last time** you had sex with a commercial partner *(someone you paid money for sex)*, did you and your partner use a condom? Nthawi ija yoshizila ugona ndi nchisumbali chacimasomaso wina wache omwe una lipila ndalama pogona naye?	YES 1 NO 2 →**Q505** DON'T KNOW 8 →**Q506** NO RESPONSE 9 →**Q506**	
Q504	Who suggested condom use that time? Anakumbuka ndani kusewenzetsa mplia wakondomu pa nthwawi ija? **CIRCLE ONE**	Myself 1 →**Q506** My partner 2 →**Q506** Joint decision 3 →**Q506** NO RESPONSE 9 →**Q506**	

No.	Questions and Filters	Coding categories			Skip to
			Y	N	
Q505	Why didn't you and this person use a condom that time? Any other reasons Chifukwa ninji iwe ndi munthu uyu simuna sewenzese mpila wa kondomu nthwi ija? **CIRCLE ALL ANSWERS MENTIONED**	Not available	1	2	
		Too expensive	1	2	
		Partner objected	1	2	
		Don't like them	1	2	
		Used other contraceptive	1	2	
		Didn't think it was necessary	1	2	
		Didn't think of it	1	2	
		Could reduce the price	1	2	
		Other_____	1	2	
		DON'T KNOW	1	2	
		NO RESPONSE	1	2	
Q506	In general, how often did you and your commercial partner(s) use a condom during the past 12 months? That is since last March. Would you say every time, almost every time, sometimes, or never. Mzosezi zochitika inu ndi msumbali wanu munaona bwanji usewenzesa mpili wa kondomu?	EVERY TIME		1	
		ALMOST ALL TIME		2	
		SOMETIMES		3	
		NEVER		4	
		DON'T KNOW		8	
		NO RESPONSE		9	

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Section 6 Sexual history: non-regular non-paying sexual partners

No.	Questions and Filters	Coding categories		Skip to
Q601	**FILTER: CHECK Q304c** HAD NON-REGULAR NON-PAYING SEX PARTNER DURING LAST 12 MONTHS……[___] ↓	*DID NOT HAVE NON-REGULAR NON-PAYING SEX PARTNER DURING LAST 12 MONTHS*	[__]→	→**Q701**
Q602	Think about your **most recent** non-regular non-paying sexual partner. How many times did you have sexual intercourse with this person over the last 30 days? That is since the beginning of February. Kubukila waseli angakala ujaosafuna malipiro kuti ugona naye wagona naye ngati munthu uyu kwa matsiku makhumi atatu akubuyoku?	Number of times DON'T KNOW NO RESPONSE	|__|__| 88 99	
Q603	The **last time** you had sex with a non-regular non-paying partner, did you and this person use a condom? Nthawi yosilizala ugona ndi waseli ngakale ujaosafiwa malipilo kodi iwe ndi munthu who musenwenze mpila wa kondomu?	YES NO DON'T KNOW NO RESPONSE	1 2 8 9	 →**Q605** →**Q606** →**Q606**
Q604	Who suggested condom use that time? **CIRCLE ONE** Anganiza ndani usewenzesa mpila wakondomu pa nthawi ija?	Myself My partner Joint decision DON'T REMEMBER NO RESPONSE	1 2 3 8 9	→**Q606** →**Q606** →**Q606** →**Q606** →**Q606**

No.	Questions and Filters	Coding categories			Skip to
			Y	N	
Q605	Why didn't you and this person use a condom that time? Any other reasons. Chifukwa ninsi iwe ndiuyu munthu simuna sewenzese mpila wa kondomu? **CIRCLE ALL ANSWERS MENTIONED**	Not available	1	2	
		Too expensive	1	2	
		Partner objected	1	2	
		Don't like them	1	2	
		Used other contraceptive	1	2	
		Didn't think it was necessary	1	2	
		Didn't think of it	1	2	
		Could reduce the price	1	2	
		Other_____	1	2	
		DON'T KNOW	1	2	
		NO RESPONSE	1	2	
Q606	In general, how often did you and your non-regular non-paying partner(s) use a condom during the past 12 months? That is since last March. Would you say every time, almost every time, sometimes, or never	EVERY TIME		1	
		ALMOST EVERY TIME		2	
		SOMETIMES		3	
		NEVER		4	
		DON'T KNOW		8	
		NO RESPONSE		9	

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Section 7 Male and female condoms

No.	Questions and Filters	Coding categories		Skip to
Q701	**FILTER: SEE Q403, 503, 603…** **CONDOMS NOT USED**……[___] ↓	**CONDOMS USED**	[__]→	→**Q704**
Q702	Have you and a sexual partner *ever* used a male condom? ***(Show picture or sample of one.)*** (The respondent may not have used a condom with partners in sections 4-6, but may have used a condom at some other time in the past.) Kodi kuli tsiku inu ndiyasumbali anu munasenzesapo mpila wachikazi kapena unena kondomu? Sonyezini chipikicha oro chifanikizo cache. Kapena sinasenzese mpila wa kondomu ndi msumbali wanu pogonana 4 – 6 kapena muna sewenzesa kubuyo uku tachoka.	YES NO DON'T KNOW NO RESPONSE	1 2 8 9	→**Q704**
Q703	Have you ever *heard of* a male condom? **(Show picture or sample of one.)** (I mean a rubber object that a man puts on his penis before sex.) Munavelako ampila wakondomu wachimuna? (Onesani chitunzi kapena chifunikso chache)	YES NO DON'T KNOW NO RESPONSE	1 2 8 9	 →**Q801** →**Q801**
Q704	Do you know of any place or person from which you can obtain male condoms? Ndimalo oti kapena munthu tinga peze mpila wakondomu wachimuna?	YES NO NO RESPONSE	1 2 9	 →**Q707** →**Q707**

No.	Questions and Filters	Coding categories			Skip to
			Yes	No	
Q705	Which places or persons do you know where you can obtain male condoms? Any others? Ndimalo oti kapena anthu tinga pezeko makondomu achimuna? **PROBE AND RECORD *ALL* ANSWERS**	Shop	1	2	
		Pharmacy	1	2	
		Market	1	2	
		Clinic	1	2	
		Hospital	1	2	
		Family planning center	1	2	
		Bar/guest house/hotel	1	2	
		Peer educator	1	2	
		Friend	1	2	
		OTHER_____	1	2	
		NO RESPONSE	1	2	
Q706	How long would it take you to obtain a condom (male or female) close to your house or to where you work? Ndipatali bwanji pomwe papezeka mpila wakondomu wachimuna, kapena wachikazi kufupi ndi nyumba yanu kapena komwe musewenzela?	Under 1 hour		1	
		1 hour to 1 day		2	
		More than 1 day		3	
		DON'T KNOW		8	
		NO RESPONSE		9	
Q707	*FOR SEXUALLY ACTIVE RESPONDENTS ONLY:* During the past 12 months, did you ever have sexual intercourse *without* using a condom with any commercial sexual partner or any other sexual partner who you have never lived with and are not married to? Meezi khumi ndi wili yapitakubuyo kodi unagonapo mkazi ali yese chosenzesa mpila wa kondomu?	YES		1	
		NO		2	
		DON'T REMEMBER		8	
		NO RESPONSE		9	

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Section 8 STDs

No.	Questions and filters	Coding categories	Skip to
Q801	Have you ever heard of diseases that can be passed through sexual intercourse? Kodi munandwalapo matenda otenea kuchimuna piapena kuchkazi?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	® **Q804**
Q802	Can you describe any symptoms of STDs in women? ….. Any others? Kodi munga fotokozele mwasatane satane zindikilo zamatandaya otengela kuchikazi olo kumuna **DO *NOT* READ OUT THE SYMPTOMS** **CIRCLE 1 FOR ALL MENTIONED.** **CIRCLE 2 FOR ALL *NOT* MENTIONED.** **MORE THAN ONE ANSWER IS POSSIBLE.**	Yes No ABDOMINAL PAIN 1 2 GENITAL DISCHARGE 1 2 FOUL SMELLING DISCHARGE 1 2 BURNING PAIN ON URINATION 1 2 GENITAL ULCERS/SORES 1 2 SWELLINGS IN GROIN AREA 1 2 ITCHING 1 2 OTHER _____ 1 2 NO RESPONSE 1 2	
Q803	Can you describe any symptoms of STDs in men? ….. Any others? Tifotokozeleni dzindikilo zamatenda otegela kumwamuna? **DO *NOT* READ OUT THE SYMPTOMS** **CIRCLE 1 FOR ALL MENTIONED.** **CIRCLE 2 FOR ALL *NOT* MENTIONED.** **MORE THAN ONE ANSWER IS POSSIBLE.**	Yes No GENITAL DISCHARGE 1 2 BURNING PAIN ON URINATION 1 2 GENITAL ULCERS/SORES 1 2 SWELLINGS IN GROIN AREA 1 2 OTHER _____ 1 2 NO RESPONSE 1 2	

No.	Questions and Filters	Coding categories	Skip to
Q804	Have you had leakage (genital discharge) during the past 12 months? That is since last March. Kodi unakhalapo ndizotupatupa kwa meezi iyi khumi ndiwili yapita kubu?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q805	Have you had a sore on your private parts (genital ulcer/sore) during the past 12 months? That is since last March. Kodi unakhalapo chilonda chaka chatachi?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	

Q806	**FILTER: CHECK Q704 AND Q705** HAD DISCHARGE OR SORE IN LAST 12 MONTHS ↓ [___] Kodi munakalapo kuchokda nthawi ija munali ndi tulanda kukazi.	NO DISCHARGE OR SORE [__]→ IN LAST 12 MONTHS	® **Q901**	
	Did you do any of the following the last time you had a genital ulcer/sore or discharge: ***READ OUT. MORE THAN ONE ANSWER IS POSSIBLE.***		Y N	
	a. Seek advice/medicine from a government clinic or hospital? - Pepani nzelu makwala kuchokela mutupatala tungono kapena muzipatala dzikudzikulu za boma?		1 2	
	b. Seek advice/medicine from a workplace clinic or hospital? - Pepani tandizo ya makwala kuchokela monga kutupatal tung'ono olo kuzipatala dzikulu?		1 2	
	c. Seek advice/medicine from a church or charity-run clinic or hospital? - Pepani tandizo ku chokela mmacharichi nditupatalla twina twache olo mmudzipatala zikulu?		1 2	
	- d. Seek advice/medicine from a private clinic or hospital?			
	e. Seek advice/medicine from a chemist?		1 2	
	f. Seek advice/medicine from a traditional healer? Pepani tandizo akale kung'anga?		1 2	
	g. Bought capsules on the street?		1 2	
	h. Took medicine you had at home? Sewenzesani mukwala mulinawo munyuumba?		1 2	
	i. Tell your sexual partner about			

	the discharge/ STD? Muuze msumbali wako pazamatenda achiwele wele?		1	2	
	j. Stop having sex when you had the symptoms? Siyani ugona ndi makazi mukaona zizindikiro zamatenda achiwele wele?		1	2	
	k. **Always** use a condom when having sex during the time you had the symptoms? Sewenzesani makaondomu pogona Ndi mkazi panthawi ija muona kuti muli ndizi dzinditkiro zamatenda a cawele wele?		1	2	
			1	2	

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Section 9 Knowledge, opinions, and attitudes

No.	Questions and filters	Coding categories	Skip to
Q901	Have you ever heard of HIV or the disease called AIDS? Kodi unaveleko za HIV olokuti pena AIDS kapena tinenekuti matanda aliyondeyonde?	YES 1 NO 2 NO RESPONSE 9	→Q1001
Q902a	Do you know anyone who is infected with HIV or who has died of AIDS? Kodi kuli wamene uziwa ondwala matenda akaliyonde yonde angakale omwe anamwalira?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	 →903 →903 →903
Q902b	Do you have a close relative or close friend who is infected with HIV or has died of AIDS? Kodi kuli wamene uziwa ondwala matenda akaliyonde yonde angakale omwe anamwalira?	YES, A CLOSE RELATIVE 1 *YES, A CLOSE FRIEND 2* *BOTH 3* NO 4 NO RESPONSE 9	
Q903	Can people **protect** themselves from the HIV virus by using a condom **correctly every time** they have sex? Kodi anthu anga dzichinjilize yioka pamatenda aya usenzesa tumipilatao chendwa kuti makondomu nthawei lili yotse yomwe mufuna kugona ndi wamkazi?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q904	Can a person get the HIV virus from mosquito bites? Kodi munthu angayabule matenda ya yakali yonde yonde kuchola kuzuzu kapena kuti yimbu?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q905	Can people protect themselves from the HIV virus by **having one uninfected faithful** sex partner? Kodi munthu angazchinjilize iyo okha paka chilombo kamatenda yakaliyone yonde?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	

No.	Questions and filters	Coding categories	Skip to
Q906	Can people protect themselves from the HIV virus by abstaining (not having) from sexual intercourse? Kodi anthu angazi chinjilize kumatenda aya ngati mupeuka chigone gone ndeakazi	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q907	Can a person get the HIV virus by sharing a meal with someone who is infected? Kodi munthu angayambule AIDS kudya pamodzi nsima?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q908	Can a person get the HIV virus by getting injections with a needle that was already used by someone else? Kodi munthu angayambule AIDS ngati walasindwa nyeleti imodzi ndi muntu uja ondwala matenda ya AIDS?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q909	Do you think that a healthy-looking person can be infected with HIV, the virus that causes AIDS? Kodi ukumbuka kuti anthu aja oyina unenepa bwino angakale ndi matenda akaliyonde yonde?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	

No.	Questions and filters	Coding categories	Skip to
Q910	Can a pregnant woman infected with HIV or AIDS pass the virus to her unborn child? Kodi mkazi wamimba ali nikachilomobo ka AIDS mwana naga yambule?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	® **Q912** ® **Q912**
Q911	What can a pregnant woman do to decrease the chance of passing HIV to her unborn child? Kodi ndi chiyhani chimene mkazi wamimba anga chite kuti apeuse mwana wake kuyambula matenda ya AIDS? **DO NOT READ LIST** **CIRCLE ALL THAT ARE MENTIONED.**	Y N TAKE MEDICATION (Antiretrovirals) 1 2 OTHER_____ 1 2 _____ DON'T KNOW 1 2 NO RESPONSE 1 2	
Q912	Can a woman with HIV or AIDS pass the virus to her newborn child through breastfeeding? Kodi mkazi wamimba ndi HIV kaya tuzilombo twa AIDS mwana anga yambule chifukwa choyamwa?	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q913	Is it possible in your community for someone to get a confidential test to find out if they are infected with HIV? By confidential, I mean that no one will know the result if you don't want them to know it. Nanga nichosteka mumudzi wanu kuti winawache upimani mwa chisis mukuti adziwe ngati muli ndi AIDS? (Kuti chisisi sindifuna alietse ku ziwa)	YES 1 NO 2 DON'T KNOW 8 NO RESPONSE 9	
Q914	**RESTATE CONFIDENTIALITY** I don't want to know the result, but have *you* ever had an HIV test? Sindi funa kuziwa zakupimidwa kwanga. Kodi ana kupimapo zoti aziwe kuti uli ndi AIDS?	YES 1 NO 2 NO RESPONSE 9	® **1001**

No.	Questions and filters	Coding categories	Skip to
Q915	Did you voluntarily undergo the AIDS test, or were you required to have the test? Kodi munazipeleka zoti akakupini ngati muli ndi AIDS? Kapena kulikomwe mufuna kuti akakupini)	Voluntary 1 Required 2 NO RESPONSE 9	
Q916	Please do not tell me the result, but did you find out the result of your test? Napapata osandiuza zakupimidwa kwanga, kodi wafusa zakupimidwa kwa mzako?	YES 1 NO 2 NO RESPONSE 9	

That is the end of our questionnaire. Thank you very much for taking time to answer these questions. We appreciate your help.